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Christina M. Doyle (Depositor's name)
(HAMCER JULY)
(Signature)
(13 Apr.) 2005
(Base)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/699,751	11/03/2003	Nigel Maurice Harford	B45053X1D1C3	1252

TITLE OF INVENTION: VACCINE AGAINST MUMPS CONTAINING A JERYL-LYNN VIRUS STRAIN

APPLN, TYPE	SMAILL ENTITY	· ISSUE FEE		PUBLICATION FEE	YOYAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$140	0	\$300	\$1700	04/13/2005 .	
EXAMINER		ART UNIT		CLASS-SUBCLASS	] "	•	
MCGAW, MICHAEL M		. 1648	1	424-202100	-		
CFR 1.363).  Li Change of correspon Address form PTO/SB/  "Fee Address" indice PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AM	ation (or "Fee Address" Indict or more recent) attached Us D RESIDENCE DATA TO B as an assignce is identified b in 37 CFR 3.11. Completion	Correspondence  thion form of a Customer  E PRINTED ON Tollow, no assignee of this form is NO	(1) the na or agents (2) the na registered 2 register listed, no THE PATEN data will app T a substitute	nting on the patent front page, li- mes of up to 3 registered pate. OR, alternatively, mee of a single firm (having as- actomey or agent) and the nam of patent interneys or agents. If name will be printed.  I (print or type) coar on the patent. If an assign for filling an assignment.  CE: (CITY and STATE OR CO	a member a 2 Jaso ness of up to no name is 3 Edwar	iam R. Majarian n C. Fedon rd R. Gimmi c document has been filed for	
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a. Applicant claims	s (from status indicated above SMALL ENTITY status, See	37 CFR 1.27.	□ b. Applie	cant is no longer claiming SMA	LL ENTITY status. See 37	CFR 1.27(g)(2).	
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Authorized Signature Date 04/13/2005

Typed or printed name Jason C. Redon Registration No. 48,138

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